

County: Outagamie
 RENNES HEALTH CENTER-APPLETON
 325 EAST FLORIDA AVENUE
 APPLETON 54911 Phone: (920) 731-7310

Facility ID: 7850

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Operated from 1/1 To 12/31 Days of Operation: 365
 Operate in Conjunction with Hospital? No
 Number of Beds Set Up and Staffed (12/31/03): 68
 Total Licensed Bed Capacity (12/31/03): 68
 Number of Residents on 12/31/03: 66
 Ownership: Corporation
 Highest Level License: Skilled
 Operate in Conjunction with CBRF? No
 Title 18 (Medicare) Certified? Yes
 Title 19 (Medicaid) Certified? Yes
 Average Daily Census: 60

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		34.8
Supp. Home Care-Personal Care	No					1 - 4 Years		31.8
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	1.5	More Than 4 Years		13.6
Day Services	No	Mental Illness (Org./Psy)	42.4	65 - 74	3.0			----
Respite Care	No	Mental Illness (Other)	1.5	75 - 84	22.7			80.3
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	60.6	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	12.1	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	9.1		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	13.6	65 & Over	98.5	-----		
Transportation	No	Cerebrovascular	12.1		-----	RNs		13.9
Referral Service	No	Diabetes	0.0	Gender	%	LPNs		7.6
Other Services	No	Respiratory	3.0		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	18.2	Male	25.8	Aides, & Orderlies		
Mentally Ill	No		----	Female	74.2			
Provide Day Programming for			100.0		----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care						Total Resi- dents	% Of All
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%		
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Skilled Care	2	100.0	226	12	100.0	126	0	0.0	0	52	100.0	178	0	0.0	0	0	0.0	66	100.0
Intermediate	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	2	100.0		12	100.0		0	0.0		52	100.0		0	0.0		0	0.0	66	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				

Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	0.9	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	7.4	Bathing	1.5	83.3	15.2	66
Other Nursing Homes	3.7	Dressing	3.0	89.4	7.6	66
Acute Care Hospitals	76.9	Transferring	7.6	80.3	12.1	66
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	4.5	78.8	16.7	66
Rehabilitation Hospitals	0.9	Eating	53.0	40.9	6.1	66
Other Locations	10.2	*****				
Total Number of Admissions	108	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	7.6	Receiving Respiratory Care	0.0	
Private Home/No Home Health	30.5	Occ/Freq. Incontinent of Bladder	62.1	Receiving Tracheostomy Care	0.0	
Private Home/With Home Health	12.6	Occ/Freq. Incontinent of Bowel	33.3	Receiving Suctioning	0.0	
Other Nursing Homes	3.2			Receiving Ostomy Care	0.0	
Acute Care Hospitals	6.3	Mobility		Receiving Tube Feeding	1.5	
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	6.1	Receiving Mechanically Altered Diets	22.7	
Rehabilitation Hospitals	0.0					
Other Locations	16.8	Skin Care		Other Resident Characteristics		
Deaths	30.5	With Pressure Sores	4.5	Have Advance Directives	89.4	
Total Number of Discharges		With Rashes	7.6	Medications		
(Including Deaths)	95			Receiving Psychoactive Drugs	56.1	

 Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	92.4	86.2	1.07	87.1	1.06	88.1	1.05	87.4	1.06
Current Residents from In-County	84.8	78.5	1.08	81.0	1.05	82.1	1.03	76.7	1.11
Admissions from In-County, Still Residing	27.8	17.5	1.59	19.8	1.41	20.1	1.38	19.6	1.41
Admissions/Average Daily Census	180.0	195.4	0.92	158.0	1.14	155.7	1.16	141.3	1.27
Discharges/Average Daily Census	158.3	193.0	0.82	157.4	1.01	155.1	1.02	142.5	1.11
Discharges To Private Residence/Average Daily Census	68.3	87.0	0.79	74.2	0.92	68.7	1.00	61.6	1.11
Residents Receiving Skilled Care	100	94.4	1.06	94.6	1.06	94.0	1.06	88.1	1.14
Residents Aged 65 and Older	98.5	92.3	1.07	94.7	1.04	92.0	1.07	87.8	1.12
Title 19 (Medicaid) Funded Residents	18.2	60.6	0.30	57.2	0.32	61.7	0.29	65.9	0.28
Private Pay Funded Residents	78.8	20.9	3.76	28.5	2.76	23.7	3.33	21.0	3.76
Developmentally Disabled Residents	0.0	0.8	0.00	1.3	0.00	1.1	0.00	6.5	0.00
Mentally Ill Residents	43.9	28.7	1.53	33.8	1.30	35.8	1.23	33.6	1.31
General Medical Service Residents	18.2	24.5	0.74	21.6	0.84	23.1	0.79	20.6	0.88
Impaired ADL (Mean)	49.4	49.1	1.01	48.5	1.02	49.5	1.00	49.4	1.00
Psychological Problems	56.1	54.2	1.03	57.1	0.98	58.2	0.96	57.4	0.98
Nursing Care Required (Mean)	4.5	6.8	0.67	6.7	0.68	6.9	0.66	7.3	0.62